



Docket No.: T3264-906343

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(N.E.)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of :
Pierre CALVEZ et al. : Art Unit: 2134
Serial No.: 09/499,736 : Examiner: Michael J. SIMITOSKI
Filing Date: February 8, 2000 :
Title: DEVICE AND PROCESS FOR REMOTE :
AUTHENTICATION OF A USER :

AMENDMENT

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Official Action dated February 20, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims beginning on page 2 of this paper.

Remarks begin on page 10 of this paper.



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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/499,736	
	Filing Date	February 8, 2000	
	First Named Inventor	Pierre CALVEZ et al.	
	Art Unit	2134	
	Examiner Name	Michael J. SIMITOSKI	
Total Number of Pages in This Submission	12	Attorney Docket Number	T3264-906343

ENCLOSURES (check all that apply)		
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<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Edward J. Kondracki
Signature	
Date	April 15, 2004

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